

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: Not yet assigned
Applicant: Dinesh Katiyar, Eshwar Belani, Pradeep Javangula
Assignee: E.piphany, Inc.
Filing Date: July 18, 2003
Title: PUBLISH-SUBSCRIBE ARCHITECTURE USING INFORMATION OBJECTS IN
A COMPUTER NETWORK

Examiner: Flynn
Group Art Unit: 2138

Docket No.: EPI-019-1C US (7034323001)

19704 U.S. PTO
10/622336
07/18/03UTILITY PATENT APPLICATION & FEE TRANSMITTAL
(for nonprovisional applications under 37 CFR § 1.53(b))


Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in connection with the above-identified patent application are the following:

I. Elements of the Application	
<input checked="" type="checkbox"/> Application	[58] page(s) of Specification [24] sheets of Drawings Formal
<input checked="" type="checkbox"/> Declaration and Power of Attorney [2] page(s) [] Unexecuted [X] Executed [X] Copy from prior application (37CFR § 1.63(d))	
II. Claim for U.S. Priority	
<input checked="" type="checkbox"/> This application is a <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part of Prior Application No. <u>09/312,131</u> filed <u>May 14, 1999</u> . (35 USC §120)	
<input checked="" type="checkbox"/> The entire disclosure of the prior application referenced above, is considered as being part of the application filed herewith and is herein incorporated by reference in its entirety.	
IV. Accompanying Documents	
<input checked="" type="checkbox"/> A Preliminary Amendment [19] page(s)	
<input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	

Express Mail No. EV 348 163 292 USPatent
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V. Fee Calculation					
<input checked="" type="checkbox"/> The following fees are submitted:					CALCULATIONS
		OTHER THAN SMALL ENTITY	SMALL ENTITY	\$	
BASIC NATIONAL FILING FEE		\$ 750.00	\$ 375.00	\$	750.00
EXTRA CLAIMS FEE					
CLAIMS	# FILED	# EXTRA	RATE	RATE	
Total Claims	22 - 20 =	2	× \$18.00	× \$ 9.00	\$ 36.00
Independent claims	3 - 3 =		× \$80.00	× \$40.00	\$
MULTIPLE DEPENDENT CLAIM(S)					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$270.00	\$135.00	\$	
OTHER FEES _____ (specify)					\$
TOTAL FEES =					\$ 786.00
a. <input checked="" type="checkbox"/> Please charge Deposit Account No.: <u>50-2518</u> , Docket No. <u>7034323001</u> , in the amount of <u>\$786.00</u> to cover the above fees. <i>A duplicate copy of this sheet is enclosed.</i>					
c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>50-2518</u> , Docket No. <u>7034323001</u> . <i>A duplicate copy of this sheet is enclosed</i>					
SEND ALL CORRESPONDENCE TO:					
Jeffrey S. Smith Bingham McCutchen LLP Three Embarcadero Center, 18th Floor San Francisco, CA 94111 Telephone: (650) 849-4400 Facsimile: (650) 849-4800		<div style="text-align: center;"> SIGNATURE</div> <div style="text-align: center;"><u>July 18, 2003</u> DATE</div> <div style="text-align: center;">Jeffrey S. Smith 39,377</div>			

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